Facility Name_____

Address _____ **Phone** _____

State License Number _____**CLIA Number**_____

Laboratory Director _____ **(print name)**

Laboratory Director Signature _____ **Date** _____

	LICENSED LABORATORY ATTESTATION FORM				
TAG	**REGULATION TEXT**	**Y**	**N**	**N/A**	
	NRS 652.180 **Duties of laboratory director.** A laboratory director shall: 1. Select and supervise all laboratory procedures; ▪ ***Assure the Director has reviewed and signed all policies and validation of each test methodology.*** 2. Report the findings or results of laboratory tests; 3. Actively participate in the operation of the laboratory to the extent necessary to assure compliance with the provisions of this chapter; 4. Be responsible for the proper performance of all work in the laboratory and of all subordinates; and 5. Retain the health care and other regularly maintained records of the laboratory in accordance with regulations adopted by the Board pursuant to NRS 652.135. ▪ ***Maintain records: Pathology = 10 years*** ***Blood Bank and Cytology = 5 years*** ***All other specialties/subspecialties = 2 years***				
	NRS 652.190 **Examination, review and referral of specimens; reporting of results;** recommendation for review of results by physician. 1. A laboratory may examine specimens only at the request of: (a) A licensed physician; (b) Any other person authorized by law to use the findings of laboratory tests and examinations; or				

	LICENSED LABORATORY ATTESTATION FORM				
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	(c) If the examination can be made with a testing device or kit which is approved by the Food and Drug Administration for use in the home and which is available to the public without a prescription, any person. 2. Except as otherwise provided in NRS 441A.150, 442.325 and 652.193, the laboratory may report the results of the examination only to: (a) The person requesting the test or procedure; (b) A provider of health care who is treating or providing assistance in the treatment of the patient; (c) A provider of health care to whom the patient has been referred; and (d) The patient for whom the testing or procedure was performed. 3. The laboratory report must contain the name of the laboratory. If a specimen is accepted by a laboratory and is referred to another laboratory, the name and address of the other laboratory must be clearly shown by the referring laboratory on the report to the person requesting the test or procedure. 4. Whenever an examination is made pursuant to paragraph (c) of subsection 1, the laboratory report must contain a provision which recommends that the results of the examination be reviewed and interpreted by a physician or other licensed provider of health care.				
	NRS 652.195 **Cytologic examination of gynecologic specimens**: Direct billing required; unlawful practices; exceptions. 1. A laboratory which performs a cytologic examination of gynecologic specimens for a patient residing in this State shall submit any bill for those services to: (a) The patient directly; (b) The responsible insurer or other third-party payor; or (c) The hospital, public health clinic or nonprofit health clinic. Except as otherwise provided in subsection 3, the laboratory shall not submit the bill for those				

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	services to the physician who directed the examination. 2. Except as otherwise provided in subsection 3, it is unlawful for a physician to charge, bill or otherwise solicit payment from a person for cytologic services relating to the examination of gynecologic specimens. 3. The provisions of this section do not apply to cytologic services: (a) Rendered by the physician himself or in a laboratory operated solely in connection with the diagnosis or treatment of his own patients; or (b) Provided to an enrollee pursuant to a health care plan authorized pursuant to chapter 695C of NRS.				
	NRS 652.200 **Limitation on contents of laboratory's report**. No interpretation of test results, diagnosis, prognosis or suggested treatment may appear on the laboratory report form, unless the report is made by a physician licensed to practice in this state.				
	NRS 652.210 **Manipulation for collection of specimens;** authorized practices of technical personnel. 1. Except as otherwise provided in subsection 2 and NRS 126.121, no person other than a licensed physician, a licensed optometrist, a licensed practical nurse, a registered nurse, a physician assistant licensed pursuant to chapter 630 or 633 of NRS, a certified intermediate emergency medical technician, a certified advanced emergency medical technician, a practitioner of respiratory care licensed pursuant to chapter 630 of NRS or a licensed dentist may manipulate a person for the collection of specimens. 2. The technical personnel of a laboratory may collect blood, remove stomach contents, perform certain diagnostic skin tests or field blood tests or collect material for smears and cultures.				

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	NRS 652.235 **Applicability to laboratory operated by licensed physician solely in connection with diagnosis or treatment of own patients;** requirements. 1. A licensed physician may operate a medical laboratory solely in connection with the diagnosis or treatment of his own patients if the medical laboratory complies with the provisions of this section. 2. Each such medical laboratory shall: (a) Register with the Health Division. (b) Comply with the rules and regulations adopted by the Board pursuant to NRS 652.130. (c) Submit to the inspections and tests provided for in subsections 1 and 2 of NRS 652.140.				
L0011	**Regulation** NAC652.280(1) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** A director shall ensure that: 1. Policies and procedures are established and enforced to ensure the health, welfare, and safety of the personnel of the laboratory and visitors. ***This provision applies to safety in the laboratory area. Universal Precautions and Policies should be developed and enforced.*** ▪ ***Written policy available which prohibits eating, drinking, smoking and storage of food in the lab area.*** ▪ ***Proper disinfection of lab area.***				
L0012	**Regulation** NAC652.280(2)(a)(b) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** A director shall ensure that: 2. The physical premises and environmental conditions of the				

	LICENSED LABORATORY ATTESTATION FORM				
TAG	**REGULATION TEXT**	**Y**	**N**	**N/A**	
	laboratory: (a) are appropriate for the testing performed. (b) Provide a safe environment in which employees are protected from biological, chemical and physical hazards. ▪ ***Proper disposal of bio-hazardous waste.*** ▪ ***Puncture-proof sharps containers available. No bending, breaking or recapping needles.***				
L0013	**Regulation** NAC652.280(3) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** A director shall ensure that: 3. The laboratory is adequately ventilated, with temperatures controlled within the requirements of the tests performed. ▪ ***Adequate ventilation, temperatures controlled, monitored and documented.*** ▪ ***A daily temperature log for room, refrigerator, and freezer (if applicable) must be kept. The correct temperature range must be established and noted on the log, and the daily temperatures must be within that range or corrective action must be taken.***				
L0014	**Regulation** NAC652.280(4) **Type** Rule A director shall ensure that: 4. Showers and eyewashes are provided where necessary for safety. ▪ ***Eyewash available (portable or fixed eyewash station) in or near the testing area.*** ▪ ***Showers are available if necessary.***				

	LICENSED LABORATORY ATTESTATION FORM				
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L0016	**Regulation** NAC652.282(1) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** A director shall ensure that: 1. The testing systems developed and used for each of the tests performed in the laboratory result in services of high quality for the analytic phase of each test and any activities conducted before and after that phase. ▪ ***Written procedures for each step of all tests performed, including specimen collection and acceptability, are to be available at the bench. (Package inserts are acceptable)*** ▪ ***All procedures must be signed by the laboratory director.*** ▪ ***All tests performed are of adequate methodology to provide patient care.*** ▪ ***Criteria for acceptance and rejection of specimens must be in writing.*** ▪ ***A system is in place to ensure positive patient identification throughout the entire testing process.***				
L0017	**Regulation** NAC652.282(2) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** rector shall ensure that: 2. Acceptable levels of analytical performance are established and maintained for each testing system. ▪ ***Calibration and calibration verification (every 6 months) records are available for the past 2 years.***				
L0018	**Regulation** NAC652.282(3) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** A director shall ensure that: 3. The methodology selected for each test yields results of a sufficient quality to provide for the care of patients. ▪ ***Normal patient values and reportable ranges are established for each instrument/method.*** ▪ ***Reference ranges should be established for each instrument/method and verified annually.***				

	LICENSED LABORATORY ATTESTATION FORM				
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	▪ ***Panic values are established and a notification policy is written an followed.***				
L0019	**Regulation** NAC652.282(4) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** A director shall ensure that: 4. The procedures used for the verification of testing methods are adequate to determine the accuracy, precision and other pertinent characteristics of performance for those methods. ▪ ***Validation for each instrument must include precision, accuracy and linearity data.*** ▪ ***All data must be accepted and signed by the laboratory director.*** ▪ ***Correlation must be performed with existing method for all new tests being added.***				
L0021	**Regulation** NAC652.282(6) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** A director shall ensure that: 6. The reports of testing results include the pertinent information required to interpret those results. ▪ ***Normal ranges must be included on patient reports.***				
L0022	**Regulation** NAC652.282(7) **Type** Rule A director shall ensure that: 7. Programs of quality control and quality assurance are established and maintained to ensure the quality of the laboratory's services and to identify any failure of quality when it occurs, and that records of such programs are maintained by the laboratory for at least 2 years. ▪ ***A comprehensive quality control program is established and maintained, to ensure quality of results and to identify failures.*** ▪ ***Two levels, at minimum, of controls must be run and acceptable each day of patient testing.***				

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	▪ ***Any failures of quality control are documented, along with remedial (corrective) action taken.*** ▪ ***Develop and implement a comprehensive Quality Assurance Program which includes all aspects of testing; pre-analytic, analytic and post-analytic phases and review.*** ▪ ***All documentation is to be kept available for 2 years.***				
L0023	**Regulation** NAC652.282(8)Complete **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** A director shall ensure that: 8. Whenever there is a significant deviation from the laboratory's established specifications for performance: (a) Any necessary remedial action is taken and documented; ▪ ***This would include documentation of unacceptable specimens, instrument or quality control material malfunction.*** And (b) The results of patients' tests are not reported until the deviation is corrected. ▪ ***All patient results performed during a deviation are evaluated for accuracy and repeated if necessary.*** ▪ ***No patient results are reported until corrective action is successful.***				
L0030	**Regulation** NAC652.284(1) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** A director shall ensure that: 1. The laboratory is enrolled in a program for proficiency testing regarding all the testing performed by the laboratory. ▪ ***A written policy is developed for PT testing.***				

	LICENSED LABORATORY ATTESTATION FORM				
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	▪ ***PT confirmation of enrollment is available for all tests (non-waived) being run.*** ▪ ***If no commercial PT testing is available, split sample testing will be performed twice per year.***				
L0031	**Regulation** NAC652.284(2)(a) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** A director shall ensure that: 2. All procedures of the proficiency testing program are followed, including: (a) The testing of samples as required; ▪ ***All PT samples are to be tested exactly as patient samples.*** ▪ ***All worksheets, instrument printouts, attestation statements, etc, are kept with copy of event results.***				
L0032	**Regulation** NAC652.284(2)(b) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** A director shall ensure that: 2. All procedures of the proficiency testing program are followed, including: (b) The return of results within the required time. ▪ ***Be sure all results are signed by lab director and testing personnel when submitted <u>and</u> when results are received.***				
L0034	**Regulation** NAC652.284(3) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** A director shall ensure that: 3. Corrective action, which is approved by the bureau, is performed if any results are found to be unacceptable or unsatisfactory.				

	LICENSED LABORATORY ATTESTATION FORM				
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	▪ ***Corrective action must be performed and documented for any result less than 100%.***				
L0035	**Regulation** NAC652.284(4) **Type** Rule A Director shall ensure that: 4. The maintenance of documentation to verify that all reports received regarding the program are reviewed by appropriate members of the staff for evaluation of the performance of the laboratory and identification of any problems requiring corrective action. ▪ ***PT results are to be reviewed with staff.*** ▪ ***Review of PT results and identification must be documented.***				
L0036	**Regulation** NAC652.284(5) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** A director shall ensure that: 5. If the laboratory fails to perform satisfactorily in two out of any three testing events for a procedure, the laboratory ceases to perform that procedure until it demonstrates to the satisfaction of the bureau that the deficiencies of the laboratory have been corrected in such a manner as to ensure that they will not recur. ▪ ***Failures in 2 of 3 events mandates cease testing of that analyte(s) and notification of BHCQC.***				
L0040	**Regulation** NAC652.286(1) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** A director shall ensure that: 1. The laboratory employs a sufficient number of personnel,				

	LICENSED LABORATORY ATTESTATION FORM				
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	with the appropriate education and appropriate experience or training, to perform tests and report the results accurately.				
L0041	**Regulation** NAC652.286(2)(a) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** A director shall ensure that: 2. Before the laboratory tests the specimen of any patient, all the personnel of the laboratory: (a) Have the appropriate education and experience, and receive the appropriate training, for the type and complexity of services offered by the laboratory. ▪ ***There must be a written policy developed for personnel competency and training.*** ▪ ***There must be documentation of training and competency for each testing personnel, updated annually, for each test they perform.*** ▪ ***These documents must be signed by the laboratory director.***				
	Regulation NAC652.286(2)(b) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** A director shall ensure that: 2. Before the laboratory tests the specimen of any patient, all the personnel of the laboratory: (b) Demonstrate their abilities reliably to perform all testing procedures in such a manner as to obtain and report accurate results. ▪ ***Evaluation and training must be completed successfully before any patient tests are run.***				
L0043	**Regulation** NAC652.286(3)(a)(b)				

	LICENSED LABORATORY ATTESTATION FORM				
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	Type Rule **Regulation Definition Interpretive Guideline Custom Help** A director shall ensure that: 3. Policies and procedures are established for monitoring personnel who perform the analytic phase of each test, and any activities conducted before and after that phase, to: (a) Ensure that they are competent, and maintain their competency, to process specimens, perform testing procedures, and report the results promptly and proficiently; and (b) Identify any need for remedial training or continuing education to improve their skills. ▪ ***Annual competency evaluations are to be performed.*** ▪ ***A process must be in place to determine a need for remedial training.*** ▪ ***Continuing education is necessary to maintain competency.***				
L0045	**Regulation** NAC652.286(4) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** A director shall ensure that: 4. A manual of the appropriate and current methods and procedures used in the laboratory, which is approved in writing by the director, is available to all personnel responsible for any aspect of the testing process. ▪ ***There must be a written procedure of all test methods approved in writing by the laboratory director.***				

	LICENSED LABORATORY ATTESTATION FORM				
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L0046	**Regulation** NAC652.286(5)(b) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** A director shall ensure that: 5. The duties and responsibilities of: (b) Every person engaged in the performance of the analytic phase of each test and any activities conducted before and after that phase, are specified in writing. ▪ ***All staff duties, responsibilities, and job descriptions must be available in writing.***				
L0047	**Regulation** NAC652.286(6) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** A director shall ensure that: 6. Protocols specify the examinations and procedures each person is authorized to perform, and the supervision of the person required before the results of a patient's test may be reported. ▪ ***The amount of supervision required to perform each test and report patient results must be established and available in writing.***				
L0048	**Regulation** NAC652.286(7) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** A director shall ensure that: 7. A qualified pathologist reviews all abnormal cytologic slides within 3 days after their initial screening.				
L0051	**Regulation** NAC652.290(1)				

	LICENSED LABORATORY ATTESTATION FORM				
TAG	**REGULATION TEXT**	**Y**	**N**	**N/A**	
	Type Rule **Regulation Definition Interpretive Guideline Custom Help** Blood-letting devices such as syringes, needles, and lancets must be sterile and not reused unless they are properly packaged and sterilized before each use and marked "sterilized." ▪ ***Single- use, safety needles are a good option.*** ▪ ***Non disposable instruments are to be properly labeled with visible indication of adequate sterilization.***				
L0052	**Regulation** NAC652.290(2) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** All microbial materials and blood and its products must be properly decontaminated or placed in two bags and marked "biohazard" before they are discarded in a public disposal service. ▪ ***Keep receipts from bio-hazard disposal as evidence of compliance.***				
L0053	**Regulation** NAC652.290(3) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** All disposable needles and syringes must be properly decontaminated and discarded in a container which can not be punctured.				
L0055	**Regulation** NAC652.300(1) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** Specimens received by the laboratory must be accompanied by an authorized written request or a computerized authorization.				
L0056	**Regulation** NAC652.300(2)				

	LICENSED LABORATORY ATTESTATION FORM				
TAG	**REGULATION TEXT**	**Y**	**N**	**N/A**	
	Type Rule **Regulation Definition Interpretive Guideline Custom Help** If the laboratory receives specimens referred from another laboratory, the reference lab shall report the results to the laboratory submitting the specimens.				
L0057	**Regulation** NAC652.300(3) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** Verbal requests from authorized persons may be accepted by the laboratory with proper verification. The laboratory shall obtain an authorized written request or a computerized authorization to supplement a verbal request within 30 days after the laboratory accepted the verbal request. ▪ ***Keep written requests along with verbal order log.***				
L0058	**Regulation** NAC652.300(4)(a) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** Each request must contain the following information: (a) The full name of or a number which identifies the person from whom the specimen was taken. ▪ ***Along with the patient name, a unique identification number should be used.***				
L0059	**Regulation** NAC652.300(4)(b) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** Each request must contain the following information: (b) The name of the licensed physician, other authorized person or clinical laboratory that submitted the specimen.				

	LICENSED LABORATORY ATTESTATION FORM				
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L0060	**Regulation** NAC652.300(4)(c) **Type** Rule Each request must contain the following information: (c) The date and time the specimen was collected for testing.				
L0061	**Regulation** NAC652.300(4)(d) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** Each request must contain the following information: (d) The type of test or specific test required.				
L0065	**Regulation** NAC652.310(1) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** A laboratory must maintain a daily record of accessions of specimens, each of which must be numbered or otherwise appropriately identified. ▪ ***This log may be written daily or a computer generated log is acceptable.***				
L0066	**Regulation** NAC652.310(2)(b)ALL **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** 2. Daily records of accessions of specimens must: (b) Include the following information: (1) A number that uniquely identifies each specimen, including, without limitation, an accession number or a number which identifies the person from whom the specimen was taken. (2) The date and time each specimen was received by the laboratory.				

	LICENSED LABORATORY ATTESTATION FORM				
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	(3) The condition and disposition of each specimen that does not meet the laboratory's criteria for the acceptability of specimens. ▪ ***Remember to record these on the unacceptable specimen log and notify the collection site or ordering physician.*** (4) The date on which each specimen is tested. (5) The identity of the person who performs each test.				
L0067	**Regulation** NAC652.340(1)(a) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** 1. A report by the laboratory to the source requesting the report must include, without limitation, the following: (a) The full name of or a number which identifies the person from whom the specimen was taken. (b) The name and address of the reporting laboratory.				
L0068	**Regulation** NAC652.340(1)(b) T**ype** Rule **Regulation Definition Interpretive Guideline Custom Help** 1. A report by the laboratory to the source requesting the report must include, without limitation, the following: (c) The date and time the specimen was received in the laboratory.				
L0069	**Regulation** NAC652.340(1)(c) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** 1. A report by the laboratory to the source requesting the report must include, without limitation, the following: (d) The condition of a specimen if considered unsatisfactory				

	LICENSED LABORATORY ATTESTATION FORM				
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	on receipt, for example, broken, leaked, hemolyzed or turbid.				
L0070	**Regulation** NAC652.340(1)(d) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** 1. A report by the laboratory to the source requesting the report must include, without limitation, the following: (e) The type of test or specific test performed.				
L0071	**Regulation** NAC652.340(1)(e) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** 1. A report by the laboratory to the source requesting the report must include, without limitation, the following: (f) The result of the test. ▪ ***Normal reference ranges and any other information pertinent to interpreting the test results must be included.***				
L0072	**Regulation** NAC652.340(1)(f) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** 1. A report by the laboratory to the source requesting the report must include, without limitation, the following: (g) The date of the test.				
L0073	**Regulation** NAC652.340(1)(g) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** 1. A report by the laboratory to the source requesting the report must include, without limitation, the following: (h) If the specimen is sent to a reference laboratory for				

	LICENSED LABORATORY ATTESTATION FORM				
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	testing, the identity of the reference laboratory.				
L0076	**Regulation** NAC652.340(2) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** 2. A report on tissue must be written using acceptable and standardized terminology.				
L0077	**Regulation** NAC652.340(3) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** 3. Duplicate copies or a suitable record of all reports by a laboratory must be maintained by the laboratory in accordance with 42 C.F.R. Part 493 and in a manner which allows ready identification and accessibility. ▪ ***Copies of original reports or computer images of reports are acceptable.*** ▪ ***All duplicate copies must be kept and accessible for 2 years, 5 years for blood bank and cytology and 10 years for pathology reports.***				
L0081	**Regulation** NAC652.350(1)(a) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** 1. A laboratory shall establish: (a) Written policies and practices for personnel that encourage sound practice in a laboratory. ▪ ***Policies and procedures manual should include <u>every</u> aspect of the laboratory.***				
L0082	**Regulation** NAC652.350(1)(b) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** 1. A laboratory shall establish:				

	LICENSED LABORATORY ATTESTATION FORM				
TAG	**REGULATION TEXT**	**Y**	**N**	**N/A**	
	(b) A written program for the orientation of employees. ▪ ***Include safety, employee policies, and training expectations.***				
L0083	**Regulation** NAC652.350(2)(a) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** 2. A laboratory shall maintain: (a) Current records on each employee, which include documentation of each employee's training, experience, and continuing education. ▪ ***These documents must be available and updated annually for each employee.*** ▪ ***Continuing education must be documented by the employee or by the employer if that is their policy.***				
L0084	**Regulation** NAC652.350(2)(b) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** 2. A laboratory shall maintain: (b) A health record for each employee, including the results of any physical examinations and tests performed by a laboratory which are required by the employer. ▪ ***Hepatitis status should be monitored.***				
L0090	**Regulation** NAC652.370(1) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** 1. A director shall be available to the personnel of a				

	LICENSED LABORATORY ATTESTATION FORM				
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	laboratory, in person or by telephone or other electronic means, for any necessary consultation. ▪ ***Director must be available during all routine hours of laboratory operation.***				
L0091	**Regulation** NAC652.370(2)(a) **Type** Rule 2. If the laboratory provides: (a) Only routine services regarding hematology, urinalysis, chemistry, blood gas and microbiology, the director must be on the premises of the laboratory at least once every 30 consecutive days. If the director is absent from the laboratory for 30 consecutive days or more, he shall provide a licensed substitute to serve in his place, unless the laboratory is in a rural area and the board determines that a substitute is not necessary.				
L0092	**Regulation** NAC652.370(2)(b) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** 2. If the laboratory provides: (b) Services regarding vaginal cytology, nonvaginal cytology, flow cytometry or histopathology, or toxicologic analysis involving high-pressure liquid chromatography or gas chromatography with mass spectroscopy, the director must be on the premises of the laboratory at least once every 10 consecutive days of testing. If the director is absent from the laboratory for 10 consecutive days or more of testing, he shall provide for a licensed substitute to serve in his place.				
L0093	**Regulation** NAC652.370(2)(c)				

	LICENSED LABORATORY ATTESTATION FORM				
TAG	**REGULATION TEXT**	**Y**	**N**	**N/A**	
	Type Rule 2. If the laboratory provides: (c) Any services other than those set forth in paragraphs (a) and (b), the bureau may establish the minimum frequency with which the director must be on the premises of the laboratory, which must be based upon the complexity of the testing performed by the laboratory and must not be less than once every 30 consecutive days.				
L0095	**Regulation** NAC652.370(3) **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** 3. Except as otherwise provided in this subsection, a natural person shall not simultaneously serve as director of more than five laboratories. A natural person may simultaneously serve as director of more than five laboratories if the laboratories are registered under one certificate pursuant to subsection 2 of NAC 652.180. ▪ ***The limit of 5 laboratories does not apply to exempt laboratories.***				
	Regulation NAC 652.380 **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** Director of licensed laboratory: Qualifications. (NRS 652.123, 652.125, 652.130) To qualify for a license as a director of a licensed laboratory, a person must meet one of the following qualifications: 1. Be a physician who is licensed to practice medicine in this State and: (a) Be certified in anatomical and clinical pathology, or in clinical pathology, by: (1) The American Board of Pathology; or (2) The American Osteopathic Board of Pathology;				

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	(b) Possess qualifications which are equivalent to those required for certification by either of the institutions listed in paragraph (a); (c) Within the 10 years immediately preceding his application for a license, have successfully completed a 4-year program accredited by the National Accrediting Agency for Clinical Laboratory Sciences; (d) Be certified, in accordance with NAC 652.410, as a general supervisor; or (e) Have at least 4 years of experience as a technologist: (1) In a licensed laboratory or a laboratory of a hospital, health department or university; (2) As a full-time employee working at least 30 hours per week; and (3) Under the supervision of a director who possesses a doctoral degree. 2. Hold an earned doctoral degree from an accredited institution, with a chemical, physical or biological science as his major, and: (a) Be certified by: (1) The American Board of Medical Microbiology; (2) The American Board of Clinical Chemistry; (3) The American Board of Bioanalysis; (4) The American Board of Medical Laboratory Immunology; (5) The American Board of Forensic Toxicology; or (6) The American Board of Medical Genetics; or (b) Possess qualifications which are equivalent to those required for certification by any of the institutions listed in paragraph (a). 2. In a geographical area which does not have a person who meets the qualifications set forth in subsection 1 or 2, be a physician, licensed to practice in the State of Nevada, whose experience is acceptable to the Board.				
	Regulation NAC 652.385 **Type** Rule				

	LICENSED LABORATORY ATTESTATION FORM				
TAG	**REGULATION TEXT**	**Y**	**N**	**N/A**	
	Regulation Definition Interpretive Guideline Custom Help Director of licensed laboratory testing for pulmonary conditions: Qualifications. (NRS 652.123, 652.125, 652.130) To qualify for a license as a director of a licensed laboratory testing for pulmonary conditions, a person must: 1. Be a physician certified by the American Board of Internal Medicine in the subspecialty of pulmonary disease; or 2. In a geographical area which does not have a person who meets the qualifications set forth in subsection 1, be a physician licensed to practice in this State, whose experience is acceptable to the Board.				
L0049	**Regulation** NAC652.470.1(a)(d) **Type** Standard **Regulation Definition Interpretive Guideline Custom Help** 1. Before working in a laboratory at any technical level: (a) An application for certification must be made on a form provided by the Bureau giving information on the applicant 's educational background; (d) A fee, which is not refundable, must accompany the application. ***All testing personnel must obtain a license from the State of Nevada for the position of Laboratory Assistant, at the minimum.***				

	LICENSED LABORATORY ATTESTATION FORM				
TAG	**REGULATION TEXT**	**Y**	**N**	**N/A**	
	NRS 652.127 **Requirements to qualify for certification as assistant in laboratory**. To qualify for certification as an assistant in a medical laboratory, a person must be a high school graduate or have a general equivalency diploma and: 1. Must complete at least 6 months of training approved by the Board and demonstrate an ability to perform laboratory procedures in the medical laboratory where he receives the training; or 2. Must: (a) Complete a course of instruction that qualifies him to take an examination for certification in phlebotomy that is administered by: (1) The American Medical Technologists; (2) The American Society of Clinical Pathologists; or (3) The National Certification Agency; and (b) Pass an examination specified in paragraph (a).				
	NAC 652.450 **Laboratory assistant**; blood-gas assistant. (NRS 652.123, 652.125, 652.130) 1. A laboratory assistant may perform only those procedures requiring the degree of skill commensurate with his education, training and technical abilities. Except as otherwise provided in NRS 652.217 and NAC 652.155, a laboratory assistant may not independently perform laboratory procedures, but may assist manually under direct supervision. 2. A blood-gas assistant may work only under the constant direct supervision of a blood-gas technologist or the director. To be certified as a blood-gas assistant, a person must be a high school graduate or the equivalent who is currently being trained in the determination of blood gases.				

	LICENSED LABORATORY ATTESTATION FORM				
TAG	**REGULATION TEXT**	**Y**	**N**	**N/A**	
	NAC 652.440 **Medical technician**: Activities and qualifications. (NRS 652.123, 652.125, 652.130) 1. A medical technician may perform a test only if the test is classified pursuant to 42 C.F.R. Part 493, Subpart A, as: (a) A waived test; (b) A moderate complexity test; or (c) A high complexity test, and: (1) The results of the test are read directly from an instrument; and (2) The test requires no interpretation and no intervention by the operator of the test during its analytic phase. 2. To be certified as a medical technician, a person must pass a national examination for certification and must: (a) Have an associate degree from an accredited institution as a medical technician or have successfully completed a program based on a course of study that includes chemistry, biology and a structural curriculum in techniques used in a laboratory; (b) Have successfully completed 60 semester hours of academic credit, including chemistry, biology and a structured curriculum in techniques used in a laboratory, at an accredited institution; (c) Be a high school graduate or the equivalent, have completed at least 1 year in a program for training technicians approved by the Board and have 3 years of experience in a laboratory within the preceding 5 years; or (d) Be a high school graduate or the equivalent, have successfully completed an official 50-week course in procedures for a military laboratory and have been a medical laboratory specialist or laboratory technician in the military.				

	LICENSED LABORATORY ATTESTATION FORM				
TAG	**REGULATION TEXT**	**Y**	**N**	**N/A**	
	NAC 652.420 **Clinical laboratory technologist** : Activities and qualifications. (NRS 652.123, 652.125, 652.130) 1. A clinical laboratory technologist may: (a) Perform tests which require the exercise of independent judgment, under minimum supervision or review by the director or general supervisor, in those specialties for which he has had adequate education, training and experience and in which he has demonstrated a proficiency; and (b) Supervise, if necessary, the work of the medical technicians and laboratory assistants. 2. To qualify for a certificate as a clinical laboratory technologist, a person must: (a) Successfully complete a full course of study which meets all academic requirements for a bachelor's degree in medical technology from an accredited college or university, and pass a national examination for certification approved by the Board; (b) Successfully complete a course of study for a bachelor's degree in one of the chemical, physical or biological sciences at an accredited college or university, have at least 1 year of additional full-time experience or training in the specialty or subspecialty in which he performs tests, and pass a national examination for certification approved by the Board; or (c) Pass the examination for clinical laboratory technologists given by the United States Department of Health and Human Services.				
L0111	**Regulation** NAC652.478 **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** Technologists: Specialties; activities Regulation Definition Interpretive Guideline Custom Help A technologist may: 2. Perform a test in a specialty only if he is certified in that specialty.				

	LICENSED LABORATORY ATTESTATION FORM				
TAG	**REGULATION TEXT**	**Y**	**N**	**N/A**	
L0101	**Regulation** NAC652.400(1) **Type** Rule General Supervisor Duties: Licensed lab **Regulation Definition Interpretive Guideline Custom Help** 1. The general supervisor of a licensed laboratory shall oversee the technical and administrative functions of the laboratory and may supervise other personnel, as assigned by the director.				
L0102	**Regulation** NAC652.400(2) **Type** Rule General Supervisor Duties: Licensed lab **Regulation Definition Interpretive Guideline Custom Help** 2. The general supervisor shall be on the premises during all hours in which routine tests are being performed. His presence is not required during the performance of emergency testing procedures after scheduled work hours, but he shall review these procedures during his next period of duty. ▪ ***All shifts <u>must</u> be staffed with a licensed General Supervisor.***				
L0105	**Regulation** NAC 652.410 **Type** Rule **Regulation Definition Interpretive Guideline Custom Help** **General supervisor of licensed laboratory**: Qualifications. (NRS 652.123, 652.125, 652.130) 1. To qualify for a certificate as a general supervisor of a licensed laboratory, a person must, except as otherwise provided in this section, be: a) A qualified physician serving on behalf of the director; or (b) A clinical laboratory technologist who has had at least 3 years of experience in a laboratory				

	LICENSED LABORATORY ATTESTATION FORM				
TAG	**REGULATION TEXT**	**Y**	**N**	**N/A**	
	as a full-time employee working at least 30 hours per week, of which at least 2 years have been spent working: (1) In a licensed laboratory or a laboratory of a hospital, university or health department; and (2) Under the supervision of a director who possesses a doctoral degree. 2. A technologist certified by the Board in a specialty who has had at least 3 years of experience in a laboratory as a full-time employee working at least 30 hours per week, of which at least 2 years have been spent working: (a) In a licensed laboratory or a laboratory of a hospital, university or health department; and (b) Under the supervision of a director who possesses a doctoral degree, Ê qualifies for a certificate as a general supervisor of a licensed laboratory if the tests performed in the laboratory are solely in his specialty. 3. A person who possesses a doctoral degree from an accredited institution with a major in chemical, physical or biological science and who has had at least 1 year of experience in a licensed laboratory or a laboratory of a hospital, university or health department as a full-time employee working for at least 30 hours per week under the supervision of a director who possesses a doctoral degree qualifies for a certificate as a general supervisor of a licensed laboratory. 4. A person who possesses a master's degree from an accredited institution with a major in chemical, physical or biological science and who has had at least 2 years of experience in a licensed laboratory or a laboratory of a hospital, university or health department as a full-time employee working at least 30 hours per week under the supervision of a director who possesses a doctoral degree qualifies for a certificate as a general supervisor of a licensed laboratory. [Bd. of Health, Medical Laboratories Reg. §§ 5.1.2.1.3-5.1.2.1.3.3, eff. 8-5-74]—(NAC A 10-17-86; 8-1-91; 10-22-93; R078-04, 8-5-2004)				